

County: Milwaukee  
 BEL AIR HEALTH CARE & ALZHEIMER'S CENTER  
 9350 WEST FOND DU LAC AVENUE

Facility ID: 1480

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MILWAUKEE 53225 Phone:(414) 438-4360

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 260

Total Licensed Bed Capacity (12/31/02): 260

Number of Residents on 12/31/02: 226

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

229

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.7
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		47.3
Supp. Home Care-Household Services	No	Developmental Disabilities	1.3	Under 65	17.3	More Than 4 Years		31.0
Day Services	No	Mental Illness (Org./Psy)	45.6	65 - 74	20.4			-----
Respite Care	No	Mental Illness (Other)	12.8	75 - 84	28.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.9	85 - 94	28.8	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over	4.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	6.6		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	7.5	65 & Over	82.7	-----		
Transportation	No	Cerebrovascular	7.5		-----	RNs		10.8
Referral Service	No	Diabetes	2.2	Sex	%	LPNs		14.9
Other Services	No	Respiratory	3.1	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.2	Male	35.4	Aides, & Orderlies		
Mentally Ill	No		-----	Female	64.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0			3	1.6	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	1.3
Skilled Care	8	100.0	251			170	93.4	155	6	100.0	140	20	100.0	172	10	100.0	155	0	0.0	0	214	94.7
Intermediate	---	---	---			7	3.8	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	3.1
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			2	1.1	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	0.9
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0				182	100.0		6	100.0		20	100.0		10	100.0		0	0.0		226	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
		-----							
		% Needing						Total	
Percent Admissions from:		Activities of		% Assistance of		% Totally		Number of	
		Daily Living (ADL)		Independent		One Or Two Staff		Residents	
Private Home/No Home Health 20.2		Bathing 7.5		52.7		39.8		226	
Private Home/With Home Health 8.5		Dressing 14.6		40.7		44.7		226	
Other Nursing Homes 8.5		Transferring 33.6		40.3		26.1		226	
Acute Care Hospitals 53.5		Toilet Use 23.9		32.3		43.8		226	
Psych. Hosp.-MR/DD Facilities 5.4		Eating 53.1		18.6		28.3		226	
Rehabilitation Hospitals 0.8		*****							
Other Locations 3.1									
Total Number of Admissions 129		Continence		% Special Treatments					
Percent Discharges To:		Indwelling Or External Catheter		7.1		Receiving Respiratory Care		8.0	
Private Home/No Home Health 22.9		Occ/Freq. Incontinent of Bladder		65.9		Receiving Tracheostomy Care		0.0	
Private Home/With Home Health 15.7		Occ/Freq. Incontinent of Bowel		62.8		Receiving Suctioning		0.0	
Other Nursing Homes 10.0						Receiving Ostomy Care		4.9	
Acute Care Hospitals 5.7		Mobility				Receiving Tube Feeding		7.1	
Psych. Hosp.-MR/DD Facilities 1.4		Physically Restrained		0.9		Receiving Mechanically Altered Diets		49.6	
Rehabilitation Hospitals 0.0									
Other Locations 3.6		Skin Care				Other Resident Characteristics			
Deaths 40.7		With Pressure Sores		4.9		Have Advance Directives		71.7	
Total Number of Discharges		With Rashes		3.1		Medications			
(Including Deaths) 140						Receiving Psychoactive Drugs		65.5	

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		This Facility		Ownership: Proprietary		Bed Size: 200+		Licensure: Skilled	
		%		Peer Group		Peer Group		Peer Group	
				Ratio		Ratio		Ratio	
								All Facilities	
								%	
								Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds		88.1	81.9	1.08		80.4	1.10	84.2	1.05
Current Residents from In-County		88.5	83.1	1.07		83.5	1.06	85.3	1.04
Admissions from In-County, Still Residing		28.7	18.8	1.53		25.1	1.14	21.0	1.36
Admissions/Average Daily Census		56.3	182.0	0.31		101.8	0.55	153.9	0.37
Discharges/Average Daily Census		61.1	180.8	0.34		107.7	0.57	156.0	0.39
Discharges To Private Residence/Average Daily Census		23.6	69.3	0.34		34.2	0.69	56.3	0.42
Residents Receiving Skilled Care		96.0	93.0	1.03		89.6	1.07	91.6	1.05
Residents Aged 65 and Older		82.7	87.1	0.95		90.9	0.91	91.5	0.90
Title 19 (Medicaid) Funded Residents		80.5	66.2	1.22		68.5	1.18	60.8	1.32
Private Pay Funded Residents		8.8	13.9	0.64		18.7	0.47	23.4	0.38
Developmentally Disabled Residents		1.3	1.0	1.38		0.7	1.95	0.8	1.65
Mentally Ill Residents		58.4	30.2	1.93		38.5	1.52	32.8	1.78
General Medical Service Residents		10.2	23.4	0.43		16.9	0.60	23.3	0.44
Impaired ADL (Mean)		55.1	51.7	1.07		52.1	1.06	51.0	1.08
Psychological Problems		65.5	52.9	1.24		54.1	1.21	53.9	1.21
Nursing Care Required (Mean)		9.7	7.2	1.34		7.7	1.25	7.2	1.35